



State of Connecticut
Department of Banking
Consumer Credit Division
260 Constitution Plaza, Hartford, CT 06103



Company_____

PERSONAL AND BUSINESS HISTORY STATEMENT

(Application for Check Cashing Service License)

1. Name_____
2. Residential Address_____
3. Title or Position with Applicant_____
4. Date of Birth - _____ Social Security Number_____
- MM/DD/YY
5. Place of Birth_____U.S. Citizen_____
6. Education (state fully amount of technical or professional training, if any, and where obtained).

7. Give a chronological listing of all employment over the past 20 years. Do not list positions held less than 6 months. If unemployed at any time for more than 6 months, state when or how long and for what reason (attach additional sheets if necessary).

<u>Name of Employer and Address</u>	<u>From</u>	<u>To</u>	<u>Type of Business</u>	<u>Your Position</u>

8.
 - a. Have you ever been refused any license by the Department of Banking or any other governmental body?_____
 - b. After such license was granted, was same ever suspended or revoked?_____
 - c. Has application for any such license ever been withdrawn?_____
 - d. Is there any litigation pending against you or any firm or company of which you are now a partner, officer, director or manager?_____
 - e. Were you ever a partner, officer, director or manager of any firm or company which was adjudicated a bankrupt or for which a receiver was appointed either during the time or within one year after you were so connected therewith?_____
 - f. Have you ever been charged in any suit with any fraudulent or illegal acts in any transaction of any kind or character?_____
 - g. Have you ever been convicted of any crime (not including motor vehicle traffic misdemeanors)?_____

If your answer to any of the foregoing questions is "yes", explain the circumstances fully (**attach additional sheets if necessary**).

9. What experience have you had in the money service business?

Signed _____

State of _____

County of _____

On this _____ day of _____, 20_____, personally appeared _____ to me known and known by me to be, the signer of the foregoing instrument, who being first duly sworn upon oath, deposes and says that he/she has read, signed and knows the contents thereof, and that the alleged facts therein contained are true to his/her knowledge.

Notary Public

My Commission Expires _____